

## MENOMONEE FALLS HEALTH CARE CENTER

N84 W17049 MENOMONEE AVENUE

MENOMONEE FALLS 53051 Phone: (262) 255-1180

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 104

Total Licensed Bed Capacity (12/31/03): 104

Number of Residents on 12/31/03: 95

## Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 101

## Corporation

Skilled

No

Yes

Yes

101

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		21.1
Supp. Home Care-Personal Care	No					1 - 4 Years		41.1
Supp. Home Care-Household Services	No	Developmental Disabilities	1.1	Under 65	15.8	More Than 4 Years		10.5
Day Services	No	Mental Illness (Org./Psy)	35.8	65 - 74	6.3			72.6
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	36.8			
Adult Day Care	No	Alcohol & Other Drug Abuse	2.1	85 - 94	37.9			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	3.2			
Congregate Meals	No	Cancer	6.3			Full-Time Equivalent		
Home Delivered Meals	No	Fractures	9.5			Nursing Staff per 100 Residents		
Other Meals	No	Cardiovascular	10.5	65 & Over	84.2	(12/31/03)		
Transportation	No	Cerebrovascular	11.6					
Referral Service	No	Diabetes	13.7	Gender	%	RNs		12.2
Other Services	Yes	Respiratory	3.2			LPNs		7.8
Provide Day Programming for		Other Medical Conditions	6.3	Male	33.7	Nursing Assistants,		
Mentally Ill	No			Female	66.3	Aides, & Orderlies		35.6
Provide Day Programming for			100.0					
Developmentally Disabled	No				100.0			

## Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	17	100.0	271	54	96.4	123	1	100.0	123	20	100.0	168	0	0.0	0	1	100.0	325	93
Intermediate	---	---	---	2	3.6	102	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	17	100.0		56	100.0		1	100.0		20	100.0		0	0.0		1	100.0	95	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	14.2	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0	91.6	8.4	95
Other Nursing Homes	6.9	Dressing	10.5	84.2	5.3	95
Acute Care Hospitals	77.0	Transferring	7.4	83.2	9.5	95
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	10.5	85.3	4.2	95
Rehabilitation Hospitals	0.0	Eating	52.6	46.3	1.1	95
Other Locations	2.0	*****				
Total Number of Admissions	204	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	10.5	Receiving Respiratory Care		24.2
Private Home/No Home Health	32.9	Occ/Freq. Incontinent of Bladder	66.3	Receiving Tracheostomy Care		2.1
Private Home/With Home Health	2.9	Occ/Freq. Incontinent of Bowel	42.1	Receiving Suctioning		0.0
Other Nursing Homes	14.3			Receiving Ostomy Care		2.1
Acute Care Hospitals	11.0	Mobility		Receiving Tube Feeding		1.1
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		9.5
Rehabilitation Hospitals	0.0					
Other Locations	3.3	Skin Care		Other Resident Characteristics		
Deaths	35.7	With Pressure Sores	13.7	Have Advance Directives		94.7
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	210			Receiving Psychoactive Drugs		62.1

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Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.0	84.7	1.13	87.0	1.10	86.6	1.11	87.4	1.10
Current Residents from In-County	51.6	81.8	0.63	86.4	0.60	84.5	0.61	76.7	0.67
Admissions from In-County, Still Residing	11.8	17.7	0.67	18.9	0.62	20.3	0.58	19.6	0.60
Admissions/Average Daily Census	202.0	178.7	1.13	166.7	1.21	157.3	1.28	141.3	1.43
Discharges/Average Daily Census	207.9	180.9	1.15	170.6	1.22	159.9	1.30	142.5	1.46
Discharges To Private Residence/Average Daily Census	74.3	74.3	1.00	69.1	1.07	60.3	1.23	61.6	1.21
Residents Receiving Skilled Care	97.9	93.6	1.05	94.6	1.04	93.5	1.05	88.1	1.11
Residents Aged 65 and Older	84.2	84.8	0.99	91.3	0.92	90.8	0.93	87.8	0.96
Title 19 (Medicaid) Funded Residents	58.9	64.1	0.92	58.7	1.00	58.2	1.01	65.9	0.89
Private Pay Funded Residents	21.1	13.4	1.57	22.4	0.94	23.4	0.90	21.0	1.00
Developmentally Disabled Residents	1.1	1.1	0.98	1.0	1.03	0.8	1.25	6.5	0.16
Mentally Ill Residents	35.8	32.2	1.11	34.3	1.04	33.5	1.07	33.6	1.07
General Medical Service Residents	6.3	20.8	0.30	21.0	0.30	21.4	0.30	20.6	0.31
Impaired ADL (Mean)	45.1	51.8	0.87	53.1	0.85	51.8	0.87	49.4	0.91
Psychological Problems	62.1	59.4	1.05	60.0	1.04	60.6	1.02	57.4	1.08
Nursing Care Required (Mean)	6.6	7.4	0.89	7.2	0.91	7.3	0.91	7.3	0.90